

PTO/SB/17 (12-04v2)

Approved for use through 3/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918).**FEE TRANSMITTAL  
for FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)**60.00**

Complete If Known

Application Number	10/687,014	RECEIVED
Filing Date	October 16, 2003	CENTRAL FAX CENTER
First Named Inventor	David Duncan	OCT 31 2005
Examiner Name	Jill M. Gray	
Art Unit	1774	
Attorney Docket No.	006318.00001	

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):☒ Deposit Account Deposit Account Number: **19-0733** Deposit Account Name: **Banner & Witcoff, LTD.**

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	00
Multiple dependent claims	360	80

**Total Claims**          **Extra Claims**          **Fee (\$)**          **Fee Paid (\$)**         

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**          **Extra Claims**          **Fee (\$)**          **Fee Paid (\$)**         

HP = highest number of independent claims paid for, if greater than 3.

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OICE/AP****NOV 01 2005****3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**          **Extra Sheets**          **Number of each additional 50 or fraction thereof**          **Fee (\$)**          **Fee Paid (\$)**         

         - 100 =          / 50 =          (round up to a whole number) x          =         

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): One Month Extension**Fees Paid (\$)****60.00****SUBMITTED BY**

Signature	<i>Wendell W. Harris</i>	Registration No. (Attorney/Agent)	55.881	Telephone	31-463-5900
Name (Print/Type)	Wendell W. Harris	Date	October 31, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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OCT 31 2005

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<b>TO:</b> Mail Stop Amendment		<b>FROM:</b> Wendell W. Harris	
<b>COMPANY:</b> United States Patent and Trademark Office		<b>DATE:</b> October 31, 2005	
<b>FAX NO.:</b> 571-273-8300		<b>TOTAL NO. OF PAGES:</b> (including cover sheet) 8	
<b>YOUR REFERENCE NO.:</b> 10/687,014		<b>OUR REFERENCE (C/M) NO.:</b> 06318.00001	
<b>RE:</b> In re the Application of: David Duncan Serial No.: 10/687,014 Filed: October 16, 2003 For: TEXTURED WIRE TIE AND METHODS OF MAKING SAME		Atty. Docket No.: 06318.00001 Group Art Unit: 1774 Examiner: Jill M. Gray Confirmation No.: 7409	
If you do not receive all page(s) or have any problems receiving this transmission, please call:			
<b>NAME:</b> Jennifer Marchese		<b>PHONE:</b> 312.463.5526	

## COMMENTS:

AMENDMENT IN RESPONSE TO OFFICE ACTION MAILED JULY 18, 2005

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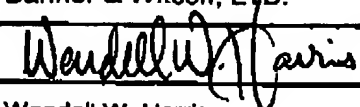
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/687,014	
	Filing Date	October 16, 2003	
	First Named Inventor	David Duncan	
	Art Unit	1774	
	Examiner Name	Jill M. Gray	
Total Number of Pages In This Submission	8	Attorney Docket Number	006318.00001

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet (1 Page)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Banner & Witcoff, LTD.		
Signature			
Printed Name	Wendell W. Harris		
Date	10/31/05	Reg. No.	55,881

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Michael W. Harris	Date	10/31/05

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